

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>g</i>		<i>03-22-01</i>
O.I.P.E. CLASSIFIER		<i>20</i>	<i>4/25</i>
FORMALITY REVIEW	<i>TH</i>	<i>953</i>	<i>01-30-01</i>
RESPONSE FORMALITY REVIEW	<i>Mo</i>	<i>1911</i>	<i>07/11/01</i>

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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*C.C.*  
*05-30-01*  
*8/21*  
*7/25/01*